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FEC FORM 2

STATEMENT OF CANDIDACY

	e of Candidate (in full)								
	ne, Marjorie, Taylor, Mrs								
	(b) Address (number and street) ☐ Check if address changed 16083 Old Henderson Rd.					Candidate's FEC Identification Number H0GA06192			
(c) City, S	State, and ZIP Code					3. Is This		lew	Amended
Milto	n		G/	3000	4	Staten	nent 🗶 (I	N) OR	(A)
4. Party Affi	liation	5. Office Soug	ht		6. State & Dist		date		
REPUB	LICAN PARTY	House			GA	06			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)									
NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full)									
Frie	ends of Greene								
` '	ess (number and street) Marconi Dr.								
(c) City, S	State, and ZIP Code								
Alpharetta					GA	30005	5		
	D	-010114710	N OF OT		T. 10017ED	0014141	TEE0		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)									
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.									
NOTE: This designation should be filed with the principal campaign committee.									
(a) Name	e of Committee (in full)								
, ,	` ,								
(b) Address (number and street)									
(c) City S	State, and ZIP Code								
(6) Only, C	rato, and En Codo								
	I certify that I have ex	amined this Stat	ement and to	the hest of	mv knowledge a	and helief it is	strue correc	t and comp	lete
0: 1								- and comp	
Signature of Candidate						Date			
Greene, Marjorie, Taylor, Mrs.,			[Electronically Filed]			05/29/2019			
NOTE: Subr	mission of false, erroneou	s, or incomplete	information r	nay subject	the person signi	ng this Stater	ment to pena	lties of 2 U.	S.C. §437g.
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FEC FORM 2 (REV. 02/2009)